

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND											
1 Date of Request: <u>1-26-85</u>		2 Serial/Patent # <u>09/439057</u>									
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT							
	Filing			\$							
	Amendment			\$							
<input checked="" type="checkbox"/>	Extension of Time		9-26-84	\$ 475							
	Notice of Appeal/Appeal			\$							
	Petition			\$							
	Issue			\$							
	Cert of Correction/Terminal Disc.			\$							
	Maintenance			\$							
	Assignment			\$							
	Other			\$							
7 TOTAL AMOUNT OF REFUND			\$ 475								
8 TO BE REFUNDED BY:											
10 REASON:		Treasury Check									
	Overpayment	<input checked="" type="checkbox"/> Credit Deposit A/C #:									
	Duplicate Payment	9 <table border="1" style="display: inline-table; text-align: center; width: 150px;"><tr><td>1</td><td>3</td><td>--</td><td>3</td><td>4</td><td>0</td><td>3</td></tr></table>			1	3	--	3	4	0	3
1	3	--	3	4	0	3					
<input checked="" type="checkbox"/>	No Fee Due (Explanation): <div style="font-size: 1.5em; margin-top: 10px;">Late</div>										
11 REFUND REQUESTED BY:											
TYPED/PRINTED NAME: <u>F Hicks</u>		TITLE: <u>Pats Exp</u>									
SIGNATURE: <u>[Signature]</u>		PHONE: <u>571 2723218</u>									
OFFICE: <u>4700</u>											
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****											
APPROVED: _____		DATE: _____									

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to: